

# Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission	2010 MAY 17 1P 2: 0
	formation, except signatures.
Fill in dates:  Reporting Period Beginning (NAI)C+ 1/200	Ending Mary 17+160WN 26 ERK
Type of report: (Check one)  ☐8th day preceding preliminary ☐8th day preceding election	ion □30 day after election □year-end report □dissolution
SHIRLEY BERY Full Name of Candidate (if applicable)  SELECTION OF Office Sought and District  7 LIBERTY ST JASWICK  Residential Address  Tel. No. (optional)	Committee Name  Name of Committee Treasurer  Committee Mailing Address  Tel. No. (optional)
Line 1: Ending balance from prevalue 2: Total receipts this period Line 3: Subtotal (line 1 plus line 2)  Line 4: Total expenditures this period Line 5: Ending balance (line 3 minus line 5: Ending balance (line 3 minus line 6: Total in-kind contributions the Line 7: Total (all) outstanding liability Line 8: Name of bank(s) used  Affidiavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to	(page 2, line 11)  S 1751.00  S 1751.00  Friod (page 3, line 14)  S 184.50  This period (page 4)  S 800.00  The best of my knowledge and belief, a true and complete statement of all campaignments, in-kind contributions and liabilities for this reporting period and represents the this committee in accordance with the requirements of M.G.L. c. 55.
	5-17-10
Treasurer's signature (in ink)	Date
FOR CANDIDATE FILINGS O	NLY: (CANDIDATE MUST SIGN BELOW)
Affidavit of Candidate: (check 1 box only)  Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to	the best of my knowledge and belief, a true and complete statement of all campaign mittee in accordance with the requirements of M.G.L. c. 55. I have not received any ring this reporting period.  iling separate report the best of my knowledge and belief, a true and complete statement of all campaign nts, in-kind contributions and liabilities for this reporting period and represents the this committee in accordance with the requirements of M.G.L. c. 55.
Candidate signature (in ink)	Date

### SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page

number on eac	<del></del>			
Pate Paid	1	Address	Purpose of Expenditure	Amount
	(alphabetical listing)			· · · · · · · · · · · · · · · · · · ·
4/1/10	DIRTCHORSIN	RoundRock Texas	200 Signs/STAKE	s 69000
4/27/10		Orlando Florida	50 4	260 00
4/6/10	STAPLES	Danvers	Primmy Paper	140 00
4/30	Ipseuch Photo	Iswah	Peinting Paper	127 50
415	Barbmarles	Theach	Food Fundrais	200/00
410	Molly megen	Issuel	Serup / Cleanup	2000
	-7 0			
i				
11		S		
_				
·				
		T ine 12-1	Expenditures over \$50	- 
			· · · · · · · · · · · · · · · · · · ·	
E	Enter on page 1, line 4  Line 13: Expenditures \$50 and under*  Line 14: TOTAL EXPENDITURES 1/21 X			1(017 (7)

<sup>\*</sup>If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 3

#### SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only temize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

Date Name and Residential Address Received (alphabetical listing required)		A	moun	Occupation & Employer (for contributions of \$200 or mo	
4/10	Cash donations Fundrais	n 10	00 10		
5/10	Cash donation /fundraisir	<u></u> 39	000		
	CHIPHYLEN	ノ	50 O)	:	
	Emily Keogh Ipsuch	10	000		
	Mice Mauri Frsench	1	3(1)		
	Print black	10	000		:
			·		
					traktu
					~~
s					
		,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>			
ine 9: Tota	al receipts in excess of \$50 (or listed above)			·	
	al receipts \$50 and under* (not listed above)				
	TAL RECEIPTS IN THE PERIOD	1751	$\frac{1}{(2)}$	Enter on page 1, line 2	

er include them in line 9. Line 10 should include only those receipts not itemized

## SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
4/10	ITHECLOSERS" Byand Horsman	TASWCH 48 TORSTIEF RE	Band Fundiases	400
4110	Another " Briday Dight Don Francis	Joseph Rd	Band Fundrasu	400
				·
<i>i</i> .				
		Line 15:	In-kind over \$50	
		Line 16:	In-kind \$50 and under	
]	Enter on page 1, line 6	Line 17:	Total In-kind	800°C

<sup>\*</sup> If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

#### SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
·				
	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	